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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION

REQUEST FOR ALLOWABLE

AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Orig⁴cc: OCC, Hobbs
cc: Regional Office
cc: Partner
cc: file

Form C-104

Supersedes Old C-104 and C-110
Effective 1-1-65HOBBS OFFICE O.C.C.
JUN 20 1 12 PM '67

I.

Operator		SINCLAIR OIL & GAS COMPANY	
Address		P. O. Box 1920, Hobbs, New Mexico 88240	
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Lease No.	Well No.	Pool Name, Including Formation	Kind of Lease	Fee
L. C. HARRIS		5	Undesignated (Cat. San Andres)	Exempt	
Location					
Unit Letter	H	1980	Feet From The North	Line and	660
			Feet From The East		
Line of Section	22	Township	8S	Range	30E
				NMPM,	Chaves
					County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil	<input checked="" type="checkbox"/>	or Condensate	<input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Scurlock Oil Company				428 Mid-America Bldg., Midland, Tex. 79701	
Name of Authorized Transporter of Casinghead Gas	<input type="checkbox"/>	or Dry Gas	<input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
None					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected? When
	P	15	8S	30E	No

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well (X)	Gas Well	New Well (X)	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.	
Date Spudded	6-10-67	Date Compl. Ready to Prod.	6-19-67	Total Depth	3700'	P.B.T.D.	3655'		
Elevations (DF, RKB, RT, GR, etc.)		Name of Producing Formation	San Andres	Top Oil/Gas Pay	3484'	Tubing Depth	3407'		
Perforations	3484-87-99-3501-03-09-13-16-18-21-23-3560-63-67-69-81-83'						Depth Casing Shoe	3700'	
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
12-1/4"	8-5/8"OD		456'		300				
7-7/8"	4-1/2"OD		3700'		275				
	2-3/8"OD		3407'						

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

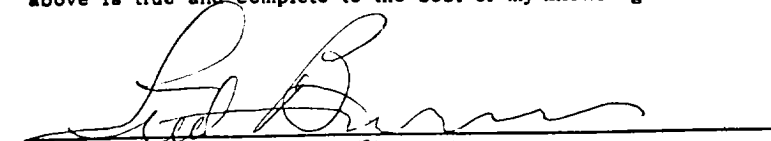
Date First New Oil Run To Tanks	6-19-67	Date of Test	6-20-67	Producing Method Flow, pump, gas lift, etc.)	
Length of Test	8 hrs.	Tubing Pressure	225#	Casing Pressure	0#
Actual Prod. During Test	86 Bbls.	Oil - Bbls.	67	Water - Bbls.	19
				Choke Size	13/64"
				Gas - MCF	42

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.


(Signature)
Superintendent
(Title)
June 20, 1967
(Date)

OIL CONSERVATION COMMISSION

APPROVED

, 19

TITLE

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.